



Nebraska Office of Highway Safety (NOHS)  
**TRAFFIC TRAINING SUPPORT**  
**MINI-GRANT CONTRACT APPLICATION AND AWARD**

**MUST BE APPROVED BY NOHS 30 DAYS PRIOR TO THE ACTIVITY**

Please Type DATE: \_\_\_\_\_

APPLICANT : \_\_\_\_\_

ADDRESS : \_\_\_\_\_

CITY, STATE, ZIP : \_\_\_\_\_

TELEPHONE NO. : \_\_\_\_\_ FEDERAL I.D. NO. : \_\_\_\_\_

EMAIL ADDRESS : \_\_\_\_\_

**PROJECT DESCRIPTION:** The purpose of this Mini-Grant Contract is to provide funding assistance for traffic safety professionals to attend training and/or conferences. Please complete items 1 - 4 below and submit for approval with a copy of the course description/agenda and a copy of your department's current seat belt policy and drug-free workplace policy.

1. **Description of training/conference to be attended. Include dates and location.**

2. **Itemized breakdown of all expenses associated with the training/conference:**

Registration Fee/Tuition:	\$ _____	Meals:	\$ _____
Lodging:	\$ _____	Misc. (please list)	\$ _____
Transportation:	\$ _____	Total Request:	\$ _____

3. **Justification of why the training/conference is needed:**

4. **Name of individual(s) attending the training/conference:** \_\_\_\_\_

This Mini-Grant Contract is financed on a reimbursement basis. The applicant must 1) receive approval of the Mini-Grant Contract from the NOHS; 2) incur the expenses (pay the bills); 3) request reimbursement for the amount awarded on a "Mini-Grant Contract Claim for Reimbursement (CR); and 4) complete the CR and attach the required supporting documentation as prescribed below.

- Itemize each expenditure on the Claim for Reimbursement.
- Attach copies of check(s) paid by the applicant for the expenses.
- Attach copies of receipts - one copy of each receipt that corresponds with each expense listed on the CR.
- An evaluation of the training/conference which was attended.
- A copy of the course completion certificate if the course was pass/fail.

Within sixty (60) days from the conclusion of the training the reimbursement request must be submitted. **After sixty (60) days, reimbursements will not be honored. THE NOHS WILL ONLY PROCESS REIMBURSEMENTS TO AN AGENCY, ORGANIZATION, ETC. NOT TO INDIVIDUALS.**

**Acceptance of Conditions:** The Mini-Grant Contract Award recipient agrees to all applicable federal and state laws, rules and regulations. Failure to comply with these conditions may result in termination of this Grant Contract Award. All Awards are subject to availability of Federal Funding.

\_\_\_\_\_  
Authorized Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print or Type Name

\_\_\_\_\_  
Nebraska Office of Highway Safety

\_\_\_\_\_  
Date

Fred E Zwonechek, Administrator  
Print or Type Name

Return completed form to: Nebraska Office of Highway Safety  
P.O. Box 94612  
Lincoln, Nebraska 68509-4612

Phone (402) 471-2515  
FAX (402) 471-3865

**TO BE COMPLETED BY NOHS**

**FUNDING ASSISTANCE:** The NOHS will provide reimbursement for the following expenditures:

Transportation \$ \_\_\_\_\_, Lodging \$ \_\_\_\_\_, Registration/Tuition \$ \_\_\_\_\_, and \_\_\_\_\_ \$ \_\_\_\_\_.  
Total Reimbursement not to Exceed \$ \_\_\_\_\_.

**Project No.:** \_\_\_\_\_

**SB:** \_\_\_\_\_

**DF:** \_\_\_\_\_

**Contract Approval Date:** \_\_\_\_\_

The Catalog of Federal Domestic Assistance (CFDA) number assigned to this Mini-Grant Contract is **20.600**.